



SECRETARY OF STATE  
Division of Charitable Solicitations  
Charitable Gaming Section  
312 Eighth Avenue North  
8th Floor, William R. Snodgrass Tower  
Nashville, TN 37243-0308  
(615) 741-2555

## AFFIDAVIT OF CANCELLATION

**This form must be signed before a notary and returned to the secretary of state.**

1. I am the chairman, president or chief administrative officer of the following organization

\_\_\_\_\_  
Name of Organization

\_\_\_\_\_  
Physical Address

2. Our previously scheduled annual event which was approved by the TN General Assembly has been cancelled.

\_\_\_\_\_  
Date of event

\_\_\_\_\_  
Location

3. The cancellation is due to : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. The organization has ☐ has not ☐ commenced the sale of tickets, shares, chances or similar records.

5. A full refund is being offered: Yes ☐ No ☐

**State terms of refund: Refunds must be available for 90 days**

- 6 The address to submit a refund claim is: (Please print clearly)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. I understand that I am not allowed to submit a new application or to conduct an annual event during the remainder of this annual event period.

I certify that the above information is true and accurate.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

### NOTARY

State of Tennessee )  
County of \_\_\_\_\_)

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Print Name clearly

My Commission expires: \_\_\_\_\_

SS-6064

RDA Pending